Monterey County

California Outcomes and Accountability System (COAS)

System Improvement Plan

2008-2010

Acknowledgements

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California's Child and Family Services Review System Improvement Plan	
County:	Monterey County
Responsible County Child Welfare Agency:	Department of Social and Employment Services, Family and Children's Services
Period of Plan:	2008-2010
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I. Local Planning Bodies

A. Monterey County Children's Council:
The mission of the Children's Council is to provide leadership and policy direction in the development and coordination of services for the children and youth of Monterey County, stimulate and mobilize broad community and agency support for the needs of children, thereby creating an environment which maximizes the opportunity for all children to grow up healthy, safe, and secure with the ability to realize their full potential. Members listed on Attachment A.

B. System of Care Governance Council:
The dual purpose of this council is to provide governance of the La Familia/Sana-System of Care Grant with Monterey County Children's Behavioral Health and oversight of the Child Welfare Redesign process for Monterey County Family and Children's Services. The Governance Council was an integral part of both the Self Assessment and System Improvement Plan (SIP) processes. Presentations and updates were provided to the Governance Council and feedback was incorporated into both the Self Assessment and SIP. Membership includes designees of the Children's Council, as well as interagency leaders, community partners, and parents of children and youth involved in System of Care agencies. Membership is listed on Attachment B.

C. Interagency Members of the Self Improvement Team:

- FCS
- Probation
- Finance and System Support Unit
- Children's Behavioral Health
- Caregivers
- ILP Youth
- Probation Youth and Families
- Community Partners

D. Consultants:

- Blue Foot Consulting LLC
- Capacity Consulting

II. Summary of the Self Assessment

Discussion of System Strengths and Areas Needing Improvements
Child Welfare Redesign in Monterey County has had tremendous success and growth since the first Self-Assessment in 2004. Many of the findings of the assessment have been addressed through the subsequent System Improvement Plans. Monterey County continues to strive for improvement by strengthening current programs and implementing cornerstone redesign programs.

Family and Children's Services and Probation have been successful at focused system improvement efforts as evidenced by the achievement of most of the SIP goals. This momentum for positive systems change, as well as the successful implementation of core redesign programs, positions both agencies for continued success. The section below highlights some of the core redesign activities, identifying areas of strength and achievement as well as areas for focused improvement. The section summarizes Family to Family, Differential Response, Wraparound, initiatives for Youth Transitioning to Adulthood, as well as new programs that further integrate consumer-driven programming.

Family to Family (F2F)
Monterey County Family and Children's Services began implementing Family to Family in 2003, expanding incrementally to cover most of Monterey County. F2F is the core of redesign in Monterey County with the philosophical values of community partnerships, team decision-making, self-evaluation, and recruiting, retaining, and supporting resource families driving systems change. Monterey County has had tremendous success with many of the strategies of F2F. Community stakeholders report that FCS is more approachable, transparent, and willing to work collaboratively. There is an increased awareness regarding child welfare needs in the county through intense marketing and outreach campaigns. Team decision-making is starting to become business as usual and our lead community agencies are fully staffed and trained. Internally, most staff reports an awareness of the core strategies of F2F.

Family to Family tenets are consistent with the Department's goals and philosophy that children are best raised by families in communities from which they come, and that strong communities produce strong families. F2F implementation in Monterey County began with a highly inclusive planning process. There was agreement among stakeholders to work towards increasing community supports and resources to ensure that more children will be placed in their own neighborhoods, with their siblings, in a family setting that will produce stability and increase reunification with their birth families. The following sections highlight accomplishments as well as challenges that FCS and their partners face for successful implementation of Family to Family.

Building Community Partnerships:
Monterey County's community partnerships have evolved and changed, partly in response to changing demographics and needs within the county. Community Human Services (CHS) has been able to expand its leadership and coordination capacities,

now working with FCS to build the F2F network in Salinas, south Monterey County, and the Monterey Peninsula. Alisal Community Healthy Start, one of FCS's original partners, continues to play a key role in the East Salinas area.

F2F local area coalition meetings serve to educate and inform FCS community partnerships about the need for resource families, as well as the needs of birth families, caregivers, children and youth at risk of abuse and neglect. Each coalition determines its area of interest and focus.

The evolution of F2F in the area of community partnerships is also met with challenges. Apart from the principal F2F partners, CHS and Alisal Community Healthy Start, other community partners reported feeling they have less of an opportunity to engage in F2F. Until recently, partner involvement was broader through a large F2FSteering Committee, which has now been dissolved. Additionally, community partner roles remain unclear. Partners expressed an interest and willingness to participate further; however a lack of mutual understanding and agreement on the definition of partnership roles limits the level of active participation.

F2F contracted partners shared that full implementation has not occurred due to leadership changes and not enough internal FCS staff support. They also stated that the reduction of actively participating CBOs has created less group process and collaboration. Additionally, CBO leadership reported a sense that their work is not appreciated and that their perspectives, and perspectives of their staff, are at times dismissed in decision making. Although there are F2F leadership meetings for coordination, planning, and oversight, partners report that action taken after these meetings is not seen and that effective change and program improvement is not occurring as rapidly as they expected.

Team Decision Making (TDM):
Monterey County is currently holding TDM's for initial entries, imminent risk, reunification and placement changes. For first entries and imminent risk, TDMs are mandatory in areas that have rolled out geographically. This now applies to all cities and rural areas in South Monterey County (Chualar and south), to all areas of Salinas except 93901 and 93908, to the Monterey Peninsula cities of Marina, Seaside, Del Rey Oaks, Sand City, Monterey and Pacific Grove. Plans for 07-08 include rolling out countywide for imminent risk and protective custody situations. Once a family has had a TDM, then subsequent moves and exit decisions are made through TDM ("once a TDM, always a TDM").

The Family to Family community liaisons employed by our lead agencies are present at TDMs in their respective geographic areas. In addition, the model for TDMs calls for inclusion of support persons identified by the parents – school personnel, church members, mentors, child care providers and others. Two Community TDM Readiness Trainings were held in 2006. A key to participation is the readiness training so that community partners understand their role. Additional trainings are planned in 07-08 for school personnel, mentors, caregivers, and others.

The majority of FCS staff and partners reported that they value TDMs and have found them to be helpful in engaging with parents and finding alternatives to removing children from their home. Additionally, there was consensus that increased resources for TDM facilitation would be useful and more likely to solidify TDM as standard practice. Currently, use of TDM is resource-driven and not implemented fully. There is concern among FCS staff about the workload implications with TDMs, and it will be imperative for managers and supervisors to assist in balancing workload while implementing the model. It can be confusing to stakeholders and staff when TDMs are not available when it would be a helpful tool. There is a consensus that TDMs are worthwhile and impactful; however, there are indications that the process needs improvement.

Feedback from F2F Liaisons, FCS staff, and consumers indicates areas for improvement with TDMs. Community Partners reported feeling that their roles have been minimized and that they are not given sufficient information from FCS to assist the families and make the community connections inherent in the F2F philosophy. Community liaisons reported a sense that as a result of system barriers and perceived staff resistance they do not have sufficient opportunity to provide the level of support to families inherent in F2F. FCS staff and partners reported concerns around the "tone" set in some TDMs, feeling that the process, fidelity of model, and collaborative spirit of TDMs were not being upheld in many situations. FCS consumers reported confusion regarding TDMs. Several reported that they had insufficient explanation about the TDM process. Some reported having enough information to know that they could bring relatives and supporters to the meeting, but when this occurred, the supporters were not engaged in the process by the facilitator.

Recruiting, Retaining, and Supporting Resource Families
Monterey County F2F seeks the active involvement of the community in the recruitment, retention, and support of resource families, through the efforts coordinated by the community liaisons, as well the integrated planning that now occurs in the monthly Recruitment sub-committee meetings. FCS has also formed a strong partnership with local media to design creative, thoughtful public service announcements that regularly run on local television and radio in both English and Spanish. Prior to Family to Family, recruitment efforts were largely tabling opportunities at a few key events, coordinated by an in-house recruiter and a small number of foster parent peer recruiters. Utilizing the slogan *Recruitment is Everyone's Business,* FCS actively encourages a much broader involvement by staff, caregivers, and community members. In several coalition areas, members are walking neighborhoods to provide information. Local businesses have been willing to distribute information on pizza boxes and with car repair bills and to post information in windows or on bulletin boards. Foster parent peer recruiters, community liaisons, and staff now routinely join together for presentations and to work events. One of the local foster family agencies has joined FCS in joint recruitment efforts, and the Juvenile Probation department has begun attending and participating in the recruitment sub-committee.

FCS has laid the foundation of philosophical values of F2F throughout its marketing and outreach messages. "Recruitment is Everyone's Business" and Family to Family is

"Everyone's Chance to Care" are branded in the marketing approach. Additionally, FCS has provided training and resources to local coalitions, liaisons, and partners regarding recruitment strategies and child-specific recruitment approaches.

This effort has made it possible for Monterey County to achieve stability in the number of licensed foster families. The decline in the number of foster families that has been experienced throughout the State has been averted locally. However, our goal to increase the number of foster families has not occurred. There are clear barriers to foster parent recruitment related to the declining value of the foster family home payment and Monterey County has serious housing and financial barriers. Additionally, feedback from staff, foster parents, and the community indicates several potential areas for improvement of recruitment for new foster homes. FCS staff believes that current foster parents are the best potential recruiters, and are investing in peer recruitment programs. However, foster parent surveys and interviews show a need for improvement in accessing timely services and reimbursements. Relative caregiver surveys and interviews echo many of the same themes. This in large measure is a result of the heavy child welfare workload that results from longstanding funding challenges that have prevented the Department from implementing lower workload standards suggested by the SB 2030 study, the Council on Accreditation, the Child Welfare League of America and reiterated in the 2007 "Final Report to Key Stakeholders: Child Welfare Budgeting Issues". Included in this resource challenge is the lack of funding for ongoing inflationary cost increases for case management and service delivery since FY 2000-01.

While FCS strives to build community relationships and share the values of becoming a resource family, challenges being experienced by caregivers and community partners may hamper the overall F2F process and impact recruitment and retention efforts.

Self Evaluation
FCS continues in its effort to develop meaningful outcome measures for our initiatives, while attempting to balance the demands of mandates for Federal and State measures. Efforts are focused on improving data integrity and the application of the quantitative information for continuous quality improvement.

Overall, staff, community partners, interagency partners, and foster parents believe in the values of F2F and are invested in its success. As with other findings in the Self-Assessment, there is a desire to work toward increased true collaboration, improved communication, and mutual accountability.

CHERISH Receiving Center
In 2004, FCS opened the CHERISH Receiving Center, a child-friendly, non-institutional center for children who have been removed from their home, or disrupted from a placement. The Receiving Center, operated by Aspira Foster and Family Services, is a 23-hour child-friendly facility with comprehensive services including mental health and physical health screenings. The center gives FCS and Children's Behavioral Health time to better assess children placed into protective custody, contact relatives and find

the best possible placements in their home communities and with siblings. The Receiving Center provides children with clothing, healthy food, and interactive child activities while FCS workers complete the investigation, assess placement options, and conduct any necessary paperwork and background checks on potential relative and near-kin care providers. A VNA nurse provides health screenings at the Center. Foster parents and social workers agree that the Center has become an integral part of the overall child welfare service delivery system.

The Receiving Center is a welcomed resource for social workers, foster parents, and children. The center allows more time for FCS to hold a TDM or find a relative, near-kin, or community-based placement. The children receive healthy food, supportive services, and have access to mental health services. Foster parents are pleased that children are now placed with clean clothes, have been treated for lice if necessary, have received a physical and mental health screening, and are generally not in a crisis situation. FCS staff report excellent relations with the community provider.

Family Reunification Partnership (FRP)
Family and Children's Services and Children's Behavioral Health (CBH) have teamed to create a brand-new unit called Family Reunification Partnership (FRP). The goals of FRP are the same as those of the Family Reunification (FR) unit, to strengthen families so that children can safely return home to their parents after they have been removed due to abuse or neglect. However, there are many things that make FRP unique.

Every FRP family is assigned a team which consists of a social worker from Family and Children's Services, a therapist from Children's Behavioral Health, and a Parent Partner from either Children's Behavioral Health or Mentor Moms and Dads. Every FRP family will have monthly Family Team Meetings (FTMs**)**, in which parents, foster parents, therapists, service providers, parent partners, social workers, and family members can participate. The purpose of these meetings is to assess how well the parents are participating in case plan activities, arrange for visitation, and assess how the children are doing in placement or at home.

The Parent Partner provides on-going support to the parents receiving FRP services. This may include helping the parents learn how to maneuver the system to get basic needs such as housing or food. This person contacts the parent at least once a week in-person or by telephone. The Foster Parent Support person provides support to the foster parent as it relates to the needs and well-being of the child, including contact in-person or by telephone at least once a week. This person works closely with the foster parent, helping him/her to identify behaviors of concern and specific interventions to help stabilize the child as he/she is going through the reunification process.

The Purposeful Visit Lead provides structure, observation, hands-on work and feedback to the birth parents and the child during weekly scheduled visits. This person will follow the parent and the child throughout the reunification process.

The Therapist provides weekly therapy needed to help the parent and/or child begin to identify and deal with the emotional and traumatic events that led to the family's participation in the FR process and to assist in their successful reunification.

The Social Worker has a face-to-face contact with the child, foster parent and parent at least once a month in order to complete an overall assessment of the family for purposes of creating a court report and meeting state regulatory requirements. In collaboration with the parent and the family team, the social worker develops a case plan, which will be attached to each court report. The recommendation written in the report will be a result of the assessment of the entire team.

In teams of two, the social workers, therapists and FRP supervisors will alternate facilitating Parent Orientation, an 8-week support/educational group for parents in the beginning stages of the reunification process. After the parents complete orientation, they will begin individual therapy with either the FRP therapist or another therapist from Children's Behavioral Health.

The FRP program began in "hybrid mode" in April 2007 with five families. The unit is co-supervised by an FCS and a CBH Supervisor. Due to the intensive nature of the program, the families who will be participating in FRP will be those with more challenging problems, such as parents who have a dual diagnosis (substance abuse and mental health issues), children with developmental delays, and parents who have participated in reunification services in the past. While the families will be some of the most challenging ones involved with Family and Children's Services, they must also have some strengths, such as family support or solid work history, which indicate that they will be able to participate in FRP services.

The FRP is a welcome addition to the service provision in child welfare. Mothers currently in reunification and Mentor Moms feel that this type of program is necessary and hoped that the intensive services will be offered to more families. There was some concern expressed regarding service disparity, however, as the waiting list for mental health and AOD services can take up to four months for parents not involved with FRP. Another key concern regarding FRP included the lack of integrated treatment and training for substance abuse issues because most of the families in FRP will have a substance abuse disorder.

Differential Response: Pathways to Safety
Differential Response, known as Pathways to Safety (P2S) in Monterey, is a three-path redesign of the Child Protective Services system. Path 1 is a primary prevention and early intervention program based on the concept that child safety is the mutual responsibility of communities and child welfare agencies. As the Department partners with communities to achieve early detection of abuse and neglect, the hope is that enough appropriate services can be provided to the child and family through front end intervention, which will enable the child to remain safely in the home with their family.

Monterey County FCS began participation in the Breakthrough Series Collaborative on DR in 2004 and 2005 and had the opportunity for Peer Technical Assistance from Contra Costa County. In November 2005, a local committee led by the ACTION Council began planning the pilot phase for DR in Monterey County. The planning process consisted of state and national research, site visits, focus groups and community surveys, and implementation of a short-term local pilot to assess engagement strategies and service delivery modalities.

From the pilot and planning process, phase II implementation strategies were developed. The recommendations include utilization of ACTION Council as the lead agency to provide leadership and coordination for the roll-out of DR in the County. In October 2006, the ACTION Council began capacity building activities for both internal partners (DSES and CBH) and for community service providers. In April 2007, the ACTION Council hired and trained Family Resource Specialists to provide Path 1 DR services in areas of the county where there is community capacity to provide services for families in need. Path 2 of DR may be implemented in fall of 2007, with joint FCS and Community responses to 10-day referrals. Key community partners for Path 1 and 2 include Door to Hope and Alisal Community Healthy Start. The Mentor Moms/Dads, individuals who successfully reunified and are now trained peer support for current CWS consumers employed through Door to Hope, have provided excellent guidance in the planning process and will be key in the service delivery and engagement for Path 2. Overall, the implementation of DR has been a success. The ACTION Council and community partners feel that FCS is very supportive of the initiative through funding and allocation of high-level analyst support. The ACTION Council reports that communication with FCS staff is improving as P2S rolls out and the referral process has been greatly improved with the addition of a recently budgeted and appointed P2S Supervisor.

Several challenges have also emerged in the course of implementation and are congruent with many of the findings of the Self-Assessment. There is a need for more consistency across agencies providing services as well as a need for training, including community and agency staff. Clearly defined roles and responsibilities and shared decision making was cited as an area for improvement.

The systemic barriers between FCS and Children's Behavioral Health, such as information sharing, coordination of resources, and communication, is clearly impeding the community providers who are working with the families in DR before they enter the system. An example of the disconnected county system was a DR referral for a child involved with CBH who had multiple needs, including addressing the family's homelessness. Instead of coordinating the needs (housing), CBH referred the family to FCS who then referred the family to DR. On a continuum of care within a system of care, families should be able to receive coordinated services from any agency, rather than being shifted through multiple processes.

Community capacity is an area of high concern as FCS and the ACTION Council look to implement DR county-wide. Currently, services in the community do not meet the

needs of families in crisis. Resources such as transitional housing, mental health services, substance abuse services, food banks, and rental assistance cannot always fully meet the immediate demands of families entering the system and families at risk of entering the system.

The resources in Monterey County are in a precarious balance with a need to expand, but an economic climate that makes it difficult. Most agencies and organizations are reporting difficulty in hiring staff, due to housing prices and non-competitive salaries. Additionally, funding for many agencies and organizations are stagnant or dwindling even in the face of ongoing cost increases to address health care, transportation, rent and staff retention and recruitment. Long-time community organizations have closed their doors and others are on the brink. Safety net resources, for the most vulnerable populations in the county, need to be maintained and expanded for early intervention strategies to be successful. This has meant that the ACTION Council is not only implementing DR, they have had to work with local communities to develop services that do not exist or do not meet the needs.

MCSTART
MCSTART (Monterey County Screening Team for Assessment, Referral, and Treatment) is a collaborative program of Door to Hope. Key partners in MCSTART are FCS and CBH. MCSTART offers identification, assessment, referral, and treatment of high risk infants who have been prenatally exposed to alcohol and other drugs. Services include extensive mental health screenings and assessment services, child development, and family functioning/parenting skills for substance-exposed children and to pregnant mothers who have used substances. Since the program began, there has been a waiting list for services.

Mentor Moms/Dads
Mentor Moms and Dads, a birth parent mentoring program, operates under the direction of Door to Hope. Mentor Moms and Dads is a program for parents who have lost custody of their children and have the court's permission to attempt reunification. Mentors are assigned to parents to provide compassionate support and guidance; they are men or women who have at least two years recovery, have regained custody of their children, and are active in recovery programs.

The Mentor Moms/Dads have played a critical role in child welfare redesign initiatives, participating in steering committees for DR, Family to Family, and have provided input on training and outreach improvements. The mentors participate in TDMs, provide trainings for staff and foster parents, and case reviews. The mentors did report some areas for improvement regarding family engagement prior to TDMs, utilizing mentors in VFM cases to prevent entry, and general customer service issues.

Initiatives and Programs Supporting Youth Successfully Transitioning To Adulthood

California Permanency for Youth Project (CPYP)
Monterey County is a county committed to finding permanence for youth and continues to incorporate permanency into daily practice. FCS has continued its involvement in the CPYP (California Permanency for Youth Project) and participates in the task force. Many examples demonstrate how Monterey County has incorporated permanence into daily practice, including documentation, case decisions, community awareness and social work education. Currently, all long-term court reports address permanency and permanent connections. Permanency is discussed at monthly case conferences with social work supervisors. In November, 2006 Monterey County implemented Permanency Conferences county-wide (previously it was done on a case-by case basis). FCS works with their community partners around permanence and what that means for them, providing technical assistance and trainings as needed. In October, 2006 FCS completed a follow-up training for CASA volunteers, group home providers and mental health providers. New social workers in Monterey County are inducted from the beginning in concurrent planning and how case decisions impact permanency outcomes. However, the FCS staff survey indicates that 30.2% are unfamiliar and 34% are only somewhat familiar with CPYP. On a positive note, 56.6% of FCS Staff indicated that they were very interested/ somewhat interested in training on permanency.

Monterey County recently purchased a search engine tool to help locate permanent connections. It will be used to facilitate stability and permanence for youth and build on efforts to incorporate permanency into our TDM Process. Since Monterey County began participating in CPYP, in April 2004, the number of youth in Long Term Foster Care has dropped from 179 to 134 (23%), at the same time the number of children in foster care has risen.

Independent Living Program
Monterey County continued to see strong program growth in FY 2006. This year marks the third year of partnership with Hartnell Community College and the fourth with the Office of Employment and Training, with a continued emphasis on improving and increasing ILP program provision for foster youth. Through this partnership, ILP has an updated curriculum and has been able to provide youth with more hands-on experiences related to daily living skills. This program, which meets a minimum of 4 times per month, is staffed by our ILP Coordinator. In March 2007, Monterey County ILP youth were included in a public forum co-sponsored by the Community Action Partnership (CAP), to discuss transitional services needs in our county.

Young Adult Resource Collaborative
Family and Children's Services continued to be the lead agency in Young Adult Resource Collaborative (YARC), a public-private partnership of professionals who have an interest in service provision of youth ages 14 to 24. This partnership and oversight group has dedicated members full of ideas, energy and enthusiasm.

Currently, members of this group are partnering to develop leadership training in public speaking. CASA has taken on the development of a leadership council. Monterey County has been approved to increase the bed capacity for the THPP program from 6 to 12 beds. Our THPP provider, Peacock Acres, is also represented in this group. At this time Monterey County is completing its THP Plus program plan, including partners and youth in this planning process.

This self-assessment revealed that while significant gains have been made with new efforts and initiatives, there are areas for improvement in services and supports for youth transitioning to adulthood. Of substantial concern is the primary placement rate for group homes in Monterey County. At present, the County is almost double the state average for that placement type, with 14.6% in group homes as primary placement. Additionally, almost all probation-supervised foster care placements are in group homes that are out of county. Probation staff and consumers expressed a desire for more placement options in Monterey County, as well as placements that were less restrictive, such as treatment foster care, FFA placement, or foster family placement.

At the same time Monterey County Probation's Juvenile Division is looking for more community-based placement options for youth, increased placement pressure on local resources is emerging due to the new requirements at the Department of Juvenile Justice (DJJ) formerly known as California Youth Authority (CYA). Many of the local youth who have historically been ordered to DJJ will not meet the new, more stringent requirements for commitment. This means that Monterey County will need to have local placement options for youth offenders, most likely taking the place of youth in Monterey County Youth Center, who may now be sent to high-level group homes. This domino effect could potentially strain the local placement system and local funding.

Increasing services and supports for youth as they transition to adulthood is a local priority. Probation youth and ILP youth reported a desire for increased access to employment services and educational opportunities.

Wraparound
Monterey County Family and Children's Services, Children's Behavioral Health, and the Probation Dept. in partnership with community based organizations have been providing families with Wraparound services for several years. Wraparound services are family-centered, community-oriented, culturally sensitive, strength-based, and individualized. These services help provide an alternative to sending children to, or keeping them in, high level group home placements. The ultimate goal of Wraparound is to keep children with their birth families, relative caretakers, or in foster families, by providing intensive, comprehensive, integrated and creative treatment, intervention and support services. Wraparound is currently being provided to an average of 36 Monterey County youth in the child welfare and probation systems, as well as an average of 6 post-adoptive youth. There are two Monterey County Wraparound providers for foster and probation youth, Unity Care, Inc. and Aspira Foster and Family Services. Additionally, Monterey

County has one of the only AAP Wraparound programs in California provided by the Kinship Center and Aspira. AAP Wraparound is provided to adoptive families with children at risk of or currently placed in a group home or institution in an effort to maintain or return the child to his/her adoptive home.

The Wraparound community team reported some challenges regarding program implementation and barriers to success. The focus group stated that there is difficulty in maintaining an appropriate program census. Many on the community team felt that Wraparound was being underutilized due to a lack of awareness of the resources in Wraparound and that too few social workers refer to the program. Additional challenges to success were identified as a lack of Wraparound training from FCS, distrust between community- based providers and interagency (FCS and Probation) staff, as well as staff views that CBOs are ineffective. Surprisingly some on the community team identified a lack of commitment to Wraparound even as the County has made substantial long range investments and commitments to the program model. The Wraparound team identified the difficulty in defining program "success" as a barrier; however, there is positive movement on defining and measuring mutually agreed upon outcomes and performance measures. A common theme throughout the self-assessment was the lack of educational representation; this was cited as a core deficit to the Wraparound program as well.

The Wraparound team did identify strengths and system improvements that have occurred since the last self-assessment. Community support and high-level support and collaboration within DSES, Children's Behavioral Health, and Probation was cited as a strength, as was commitment from the Probation Dept to train staff and send them to the Wraparound Academy. An additional strength noted was the expanding number of Wraparound providers within the County.

Summary of progress on initiatives
FCS, Probation, and its partners have made progress towards improving programs and implementing redesign initiatives. Collectively, the Self Assessment information indicates that Monterey County is an innovative county with willing collaborative partners and the human resources capable of systems change and improvement. The annual SIPs have shown that when there is a community goal, it is usually met or exceeded. One of the biggest challenges faced is one of resources as there has been no recognition in State funding of inflationary cost pressures since FY 2000-01. The information the Self-Assessment points to additional needs and areas for system improvements and recognizes the accomplishments of the dedicated staff and partners in this community.

Outcome Summary
The outcome measures point to several areas for future system improvement planning, such as timely reunification, timely adoption, recurrence in homes where children are not removed, and group home placement. It should be noted that performance on these outcome measures is highly linked to external factors, such as community capacity, funding levels and availability of services.

The capacity of FCS and Probation is always challenged and often stretched to the limit. The ability to meet standards of practice and accountability for outcomes is difficult without the resources to support the effort. In addition, un-funded or under-funded mandates also stress an already taxed system. The challenge is to create a sustainability plan that will not undermine the efforts that have been made and create an infrastructure that can serve families and children to achieve better outcomes.

Overall, Monterey County can be proud that in most cases, local outcomes met or exceeded State averages. In some instances, Monterey County exceeded the National Goal for certain outcome measures. Additionally, Monterey County should be proud of the system improvements made over the course of the last three years and with their success in implementing core redesign programs.

The following outcomes were identified in the County's 2007 Self-Assessment as areas needing improvement:

Safety Outcomes
Monterey County performed well on the safety outcomes for recurrence of maltreatment within 6 months. On this outcome, FCS had a recurrence rate of 5%, while the state average for the same time period was 7.7%. The Federal Standard for performance on this measure is 6.1%. For recurrence within 12 months, FCS had a recurrence rate of 7.6%, with the state average at 12.3%.

Over the past 3 fiscal years, Monterey County's rate of recurrence of maltreatment within 12 months in homes where children were not removed has steadily increased. Since fiscal year 2001-2002, the rate has fluctuated from a low of 5.2% to a high of 8.8%. The 7.2% for FY05 represents just over 80 children. While this is below the state average, the rate in Monterey has increased. With the implementation of Differential Response, this indicator should be a focus of attention.

FCS has improved in the area of timeliness of social worker response for both Immediate Response and 10-Day Response. FCS is now at or above the state average for Immediate, and at or slightly below the state average for 10-Day. FCS has also improved its compliance rate for Timely Social Worker Visit. Both measures were an area of focus for the 2004-2005 System Improvement Plan.

Permanency and Stability Outcomes
Since the 2004 Self-Assessment, Monterey County performance has decreased on several key permanency outcomes, such as timely reunification and timely adoption. It should be noted, however, that despite the decrease on these key measures, significant gains have been made in the reduction of older youth in long-term foster care as well as several programmatic advances in permanency for youth.

The indicators for timely reunification, percent reunified within 12 months, show that FCS has decreased from 79.4% reunification within 12 months in FY04 to 63.2% in

FY06. The National Goal for timely reunification is 76.2% or better. Qualitative analysis, from consumers in FR as well as community partners and FCS staff, indicates that the decrease in reunification is closely tied to the difficulty in accessing mental health and alcohol and substance abuse services and lack of availability of other support services, such as transitional housing. Additionally, there was consensus that the commitment to providing community-based services without removing the child, which has been enhanced by Family to Family and Differential Response, has led to the Family Reunification population becoming increasingly more acute in their services needs. The families tend to be more complicated with multiple issues, leading to more intensive services and longer timelines.

The youth in probation supervised foster care are experiencing longer median time to reunification (14.3 months) than the state average (12 months). In general, the group home placements, the most common placement for utilized for Probation, are a minimum of one year length of time. If the child experiences any setbacks, the program duration is extended. More analysis will be needed to fully understand the factors leading to longer reunification time frames.

The measures for timely adoption also indicate a need for focused attention. Over time, the percent of children adopted within 24 months in Monterey County has been consistently declining from a high of 68.6% to a low 30.6%. The National Goal for timely adoptions is 36.6%. Internal staff discussion identified several contributing factors for the decrease. FCS is working with birth families longer in order to attempt reunification, leading to increased time for termination of parental rights with failed reunification cases. On the process side, lengthy appeals, difficulty with ICPC coordination, and court paperwork delays have affected this measure. Lack of resources and capacity to complete timely home studies for both FCS and contracted partner agencies have also contributed to slower adoptions

The indicators for placement stability show Monterey County has improved in its efforts to minimize placement moves. In FY02, only 51.3% of children had 1-2 placements. The data for FY06 shows a rate of 80.9% for the state enriched measure. For the Federal Measure (exit cohort),   Monterey County is consistently performing better than the state average and exceeds the National Goal.

For re-entries into care, Monterey County has improved performance over the last few fiscal years. In FY02, 10.8% of entries were subsequent entries within 12 months of a prior exit; performance for FY06 was 7.5%. The National Goal for this measure is 8.6% and Monterey County has met or exceeded this goal over the last year.

For Probation, the re-entry rate is 18.8%, which is lower than the state average of 19.7%; however, further analysis regarding trends and service gaps may be helpful in designing parent support and after-care programs to prevent re-entry.

Family Relationships and Community Connections

Monterey County continues to be on par with the state average for placement of some or all siblings together. A focus of FCS is to improve the family relationships and community connections for all families involved in child welfare services. This focus and commitment is operationalized through the implementation of Family to Family in Monterey County. Economic and housing issues, coupled with the lack of enough foster homes, presents a challenge as FCS seeks to improve this performance. Increasing placement options for sibling groups in every community is a goal for FCS.

Placement in least restrictive settings is a priority for FCS and Probation. At this time, Monterey County group home placement rate for primary placement (14.6%) is almost double that of the state (7.6%). Efforts and services to improve in this area include Wraparound, the CHERISH Receiving Center, Interagency Placement Committee, and targeted recruitment for homes for older youth. FCS has placed an emphasis on maintaining children with a higher level of need in their homes, or in the least restrictive setting possible. Probation has an emphasis on new rehabilitative programs to allow children to safely remain in their home. Probation and FCS are always considering least restrictive settings whenever possible.

Findings from the Self-Assessment revealed a willingness and desire for increased local placements, programs and services for probation youth who are almost always placed in group homes out of county. Recruitment of foster homes, especially homes for older youth with intensive service needs is very difficult. Improvement in group home placement for Probation will be further challenged as the new DJJ (formerly the California Youth Authority) requirements for placement at their facility come into effect. This will change the dynamics and structure of some of the Monterey County juvenile offenders. Those minors who historically would have been ordered to DJJ for a non-707b offense will no longer be accepted at DJJ beginning September 1, 2007. The dilemma of how Monterey County will deal with this population has not yet been determined. This structural realignment will affect the department's programs, use of group homes, and dynamics of the department as a whole.

Well-Being Outcomes
The Independent Living Program has been a focus of System Improvement Plans and youth transitioning successfully to adulthood has been a county-level priority over the last several years. The current program design for Monterey County ILP is based upon the developmental needs of youth aging out of the foster care system. Improvements are occurring in programs designed to assist youth with educational, vocational, and housing needs, as well as providing permanent connections for youth as they transition into adulthood. Probation in collaboration with Children's Behavioral Health and a local group home provider have established a transitional house for youth that have graduated from Probation's 9-month-in-custody program (Youth Center) in situations where there is no family for the youth to reunify. It will soon be available to FCS and Probation youth transitioning from out of home care.

Systemic Factors
In Monterey County, the greatest strengths and weaknesses are systemic. Monterey County has been looked to as a model for interagency and community partnerships. The efforts of child welfare redesign and the enhancement of the children's system of care are closely tied, experiencing to some degree the same successes and challenges.

At a policy and systems level, there is an expressed need from staff for cross-systems training to understand the interconnectedness of child-serving county agencies, as well as the differences inherent in the various divisions. Across multiple stakeholder groups, there was a call for increased accountability between the interagency partners to mutually define barriers, create plans for improvement, appoint persons responsible for the plans, and communicate clearly with stakeholders regarding progress and challenges in meeting the improvement plans. Additionally, community leadership, consumers, and staff would like clear feedback loops and a continuous quality improvement framework where barriers are identified, ideas regarding improvement are heard, and timely action occurs and is communicated.

Internally at FCS and Probation, there is a clear need identified to establish a quality management system. Feedback suggests that policies, protocols and expectations need to be developed prior to utilization of QA/QM tools. Currently, the efforts are solely focused on small areas of compliance and not the larger effort of linking quality assurance to quality improvement through data analysis, documentation review, qualitative feedback, and communication. For FCS, communication challenges were a major finding of the surveys and focus groups. Communication between units and between line level staff in other agencies and partner organizations was cited as an area for improvement. Additionally, foster parents, relative caregivers, current consumers, and community partners stressed the need for improvement in timely and respectful communication with FCS. This was a finding of the 2004 Self-Assessment and it is recommended that strategies and action plans be developed and clearly communicated to stakeholders. Monterey County needs to continually strive to improve its communication with consumers, stakeholders, and community partners.

Another key finding of the self-assessment was the need for the school districts to participate more fully and in more meaningful ways with the child-serving county agencies. Community stakeholders, executive management from community organizations, caregivers, consumers, and agency staff cited the lack of educational involvement as a core deficit in service delivery and decision-making suggests that this needs to be addressed at the systems-level. This was also a key finding of the 2004 Self-Assessment and has yet to be resolved.

Probation managers report a strong partnership with MCOE and alternative education. Currently, there are seven community schools throughout the County where Probation staff are co-located. Additionally, Probation has 2 in-custody facilities where MCOE

provides the educational component. However, it should be noted that probation youth and staff cited education as an area for improvement.

Inclusiveness in case planning with stakeholders such as youth, parents, caregivers, and advocates shows improvement and yet requires further action. Feedback from the surveys and focus groups indicates that parent and youth engagement is not to the point the Department would like to see and many reported that they are not sufficiently included in key decision-making and information-sharing.

Areas for improvement for FCS also include developing additional resources to support the social work staff through ongoing training on a number of themes. These themes for training include: local community services, interagency programs, core redesign initiatives, and division-wide training in CWS/CMS. Supervisor and management staff may benefit from training on quality management frameworks, supervising through change, and transfer of learning skills.

III.   Support for Qualitative Change

Data Collection Methods: The collection and analysis of data for this report was achieved through various methods. This section outlines the various data collection techniques and describes some of the findings relevant to the outcomes addressed in this SIP report.

Statistics:
The Self-Assessment and the System Improvement Plan were driven by quantitative data from the quarterly Outcomes and Accountability County Data Reports. Throughout the Self Assessment ongoing review of data made available through statewide approved methodology and posted online at http://cssr.berkeley.edu/ucb_childwelfare/default.aspx has been compared to county level data produced through DSES, Data and Statistics Branch.

Peer Quality Case Review:
The 2007 Peer Quality Case Review (PQCR) was the first to be conducted in Monterey County. It was a "tri-county" review in collaboration with two neighboring counties: Santa Cruz and San Benito. The purpose of the PQCR was to supplement the data obtained in the self-assessment with information regarding strengths and areas of challenge garnered from focus groups, case reviews, social worker and probation officer interviews, supervisor interviews and PQCR team debriefings. In addition it provided a valuable perspective to local social work practices and allowed for a deeper understanding from a statewide perspective...

The PQCR focus area for Family and Children's Services (FCS) was recurrence of maltreatment, while the Probation Department focused on timely reunification. FCS concentrated on children 0-5 years old where the initial referral was for a positive

toxicology screen at birth for drugs and alcohol. Probation's concentration placed an emphasis on practices related to monthly face-to-face contact with parents and deputy probation officers.

The following describes key emergent themes discovered by the PQCR as promising practices and areas of challenge for both FCS and Probation:

A recurrent theme in this PQCR process was family engagement. The PQCR affirmed that FCS and Probation staff strive to engage families as quickly as possible in the least intrusive manner. For example, social workers indicated that making announced visits to a family's home can help prepare the family, allow its members to feel respected and help decrease the family's resistance to agency assistance. The PQCR also indicated an importance on bringing families and service providers to the same table to assist families in both building effective relationships and moving toward self sufficiency. The PQCR process identified some challenges in the area of family engagement these included a lack of culturally competent services (i.e., parenting resources), lack of training for staff on working with difficult to engage families, and parental resistance due to misinformation and/or not understanding the system.

A second theme raised by FCS and Probation was collaboration with community partners and service providers. Through the PQCR, FCS and Probation staff demonstrated an interest in improving levels of collaboration with community partners and service providers. Staff reported positive contact with service providers especially substance abuse treatment agencies, Juvenile Court and the Health Department. Staff identified a need for cross training between social workers, probation officers and community partners. The PQCR process affirmed that community partners, social workers and probation officers need to periodically and frequently meet to continue building strong collaborative relationships.

Another emergent PQCR theme was internal communication. The PQCR process affirmed social workers feel their Deputy Director, Program Managers and Supervisors are accessible for consult. Social workers reported that Management's open door policies are a strength. The PQCR indicated both FCS and Probation supervisors build close, supportive relationships with staff. Probation interviewees reported excellent support from their supervisor and Division Director. While strengths are noted, FCS and Probation staff identified a need to improve internal communication. The PQCR identified poor internal communication among FCS staff and management. Social workers reported a fear of management and a fear of retaliation from management. Probation staff also reported challenges and feeling that upper management does not understand the day-to-day duties and requirements of probation officers, specifically how a lack of resources, high caseloads, numerous other responsibilities and no allowable overtime make it difficult to have regular visits with parents.

Lastly, the PQCR identified promising and challenging areas in programs, policy and practice. Team Decision Making meetings, Differential Response and the use of Structured Decision Making (SDM) were identified by FCS staff as promising areas of

practice. The PQCR identified the regular use of TDMs and staffings for high and very high risk cases. FCS interviewees indicated improvement is necessary in social worker use of SDM tools. The PQCR indicated SDM tools are not understood and consistently used. A recommendation of the PQCR was to develop a clear directive on the use of SDM and to update agency policies and procedures.

While FCS interviewees identified the regular practice of social worker training plans as an area of strength, they identified a need for ongoing training and updates regarding available resources. FCS interviewees reported a lack of resources for clients. Staff reported there are long waiting lists for services, sometimes up to six months to get substance abuse treatment. Staff indicated a lack of early education programs regarding domestic violence and substance abuse for families and a lack of in-patient substance abuse treatment services that accept parents and their children.

Survey of Care providers:
Between June 25, 2007 and July 10, 2007, a total of 50 foster parents and 15 relative caregivers responded to a survey designed to gather feedback about their experience and satisfaction with FCS, their satisfaction with supports and services related to foster care provision, their interest in additional training, and other topics. Because of the very small number of responses, results must be **interpreted with caution**, and must be considered exploratory. The following are the notable areas of caregivers' feedback:

- Caregivers reported mixed sentiments with regard to social worker supports and services. Most caregivers agreed that the medical needs of children in their home are met. Yet, most disagreed with the statement that "at least monthly each child's social worker visits with me and the child in my home" and most relative caregivers were very dissatisfied with caseworker contact in person.

- Surveyed foster parents reported that they were most satisfied with foster parent support groups.

- Interviewed foster parents expressed concern about the number of placement moves of children and the number of social workers per child. They often cited the inconsistency of having multiple social workers as a source of increased stress and confusion.

- In many cases, foster parent respondents reported they did not know that services were available to them or their foster child. For example, some respondents reported CASA services and liability insurance were not available to them or their foster child. Others did not know counseling services were available to them.

- Survey findings suggest Hispanic respondents and respondents who have provided care for fewer years feel less support from the system, in terms of responsiveness of the social workers, and availability of information about the children placed in their home.

- Data from all sources shared that both FCS and Probation staff are not always providing information to families on available community resources or at minimum referring them to someone that can. Case management appears to lack some of the auxiliary services that help to strengthen child and family well-

being. Probation staff agreed that if time permitted or caseloads were lighter, they could offer more support to children and families.

- Almost all foster parent respondents reported they had attended training prior to placement of a child in their home. Unanimously, all agreed that this training prepared them to provide foster care.
- In general, all respondents reported an interest in training on effective discipline and managing negative behavior.
- Nearly all relative caregivers surveyed reported they had not attended training prior to placement of a child in their home. Although some did report that they had attended training after a child was placed in their home. All respondents who did attend training reported it helped prepare them to provide care.

Caregivers for the most part expressed discontentment with the level of contact and communication with FCS. Caregivers generally demonstrated optimism and an interest in participating in continuous opportunities for evaluation and collaboration. Input from the caregiver surveys is incorporated into the SIP report and template. Additionally, the results were shared with Probation, social workers, supervisors, and subcommittees addressing resource family recruitment and retention.

Survey of ILP Youth:
From June 21, 2007 to July 12, 2007, a total of 20 youth responded to a survey designed to gather feedback regarding their satisfaction with the Independent Living Program (ILP), as well as general satisfaction with services and supports. Because of the small number of responses, results must be **interpreted with caution**, and must be considered exploratory. The following are notable areas of the ILP youths' feedback:

- The survey revealed a need to assist ILP youth in developing positive relationships with their birth families.
- The survey indicated improvement is needed in contact/communication between the youth and their assigned Social Worker/Probation Officer.
- The survey indicates that case plan involvement still has some challenges. At least half of the youth surveyed reported being "seldom involved", "never involved" or "somewhat involved".
- The majority of the ILP youth surveyed reported participating in ILP activities at least once a month and indicated that their relationship with their ILP coordinator is "very good".
- The majority of the ILP youth surveyed reported that ILP has helped them to develop money management skills.
- The ILP youth surveyed appear to be least satisfied with preparation for college entrance exams, driver's education services, GED classes, and services around substance abuse.
- The majority of respondents reported that their current placement supports them in accessing the ILP.

Overall, the ILP youth surveyed expressed satisfaction with ILP and the hands-on experiences related to daily living skills. A remaining area of development and practice

for case managers is assisting the youth in developing or maintaining relationships with birth families, improving their contact and communication with youth and involving the youth in case planning. Input from the ILP Youth Survey is incorporated into the SIP report and template.

Key Informant Interviews:
As part of the self-assessment process, feedback was gathered from a range of stakeholders on their experience and satisfaction with FCS and Probation. Data collection methods included focus groups, community dialogues, key informant interviews, questionnaires and surveys. The following are highlights of key findings:

- Relationships among partner agencies were recognized as very important.
- Communication appeared to be an area for quality improvement across child and family service agencies. Across departments, staff expressed a desire for increased communication that is mutually supportive.
- Probation and FCS staff expressed interest in cross training. Similarly, among agencies, cross training between units was mentioned as something that would be useful.
- Probation staff expressed disappointment in general about the lack of understanding of the role of probation. There was a stated desire to increase community knowledge of the preventive and supportive role probation also employs.
- For the most part, parents expressed contentment with the Probation program. Parents shared that their relationship with their Probation Officers is positive, that the Officers are helpful and responsive. However, families and community partners perceive FCS and Probation staff as too overwhelmed with caseloads and workload to provide adequate support and understanding.
- Parents and families with youth in Probation expressed the need for increased support from peers, mentors, and/or staff immediately after a child is taken into placement.
- Mentor programs and peer support for FCS families were highlighted by participants as an effective, educational and meaningful opportunity.
- Data from all sources shared that both FCS and Probation staff do not always provide information to families on available community resources or at minimum referring them to a community resource agency or individual.
- Probation staff noted that if time permitted or caseloads were lighter, they could offer more support to children and families.
- Probation staff indicated that training regarding family/parent engagement is necessary.
- A partnership element that was raised across agencies is that education is missing and is a critical component. Staff from all agencies suggested improving educational partnerships in order to improve outcomes for youth.

Findings suggest that FCS and Probation employ a passionate workforce that is dedicated to positive family and child well-being outcomes, that they are committed to community based, family-driven programs, that they believe in shared principles and values that can be operationalized at all levels, and that they share a willingness to

improve partnerships and other internal and external factors to better meet the needs of children and families. At the same time, a number of challenges were identified. Some challenges are systemic and will require longer-term investment, while others are more tangible for small scale and short-term intervention. FCS and Probation will incorporate this information into the SIP report and template.

IV.   SIP Templates

FCS and Probation SIP Templates
The System Improvement Plan addresses outcome measures related to Safety, Permanency, and Child and Family Wellbeing. FCS and Probation have constructed the SIP to include activities that will improve performance on these outcomes, while also impacting and improving other areas of both systems. The following tables outline the System Improvement Plan, goals, strategies, and milestones.

Outcome/Systemic Factor:
S1.1 Of all children who were victims of a substantiated maltreatment allegation during the first 6 months of the year, what percent were not victims of another substantiated allegation within the next 6-month period?

County's Current Performance:
Center for Social Services Research
University of California at Berkeley
No Recurrence Of Maltreatment
Maltreated during the first 6 months of the year: No recurrence during 6 months
Apr 1, 2006 to Mar 31, 2007
Monterey

	Allegation-Type								All
	Sexual Abuse	Physical Abuse	Severe Neglect	General Neglect	Exploitation	Emotional Abuse	Caretaker Absence/Incapacity	Missing/Other	
	%	%	%	%	%	%	%	%	%
COUNT									
No recurrence of maltreatment within 6 mos	94.1	93.5	100	91	100	94.4	97.1	.	93.8
Recurrence of maltreatment within 6 mos	5.9	6.5	0	9	0	5.6	2.9	.	6.3
Total	100	100	100	100	100	100	100	.	100

26

Performance Over Time:

S1.1--No Recurrence Of Maltreatment
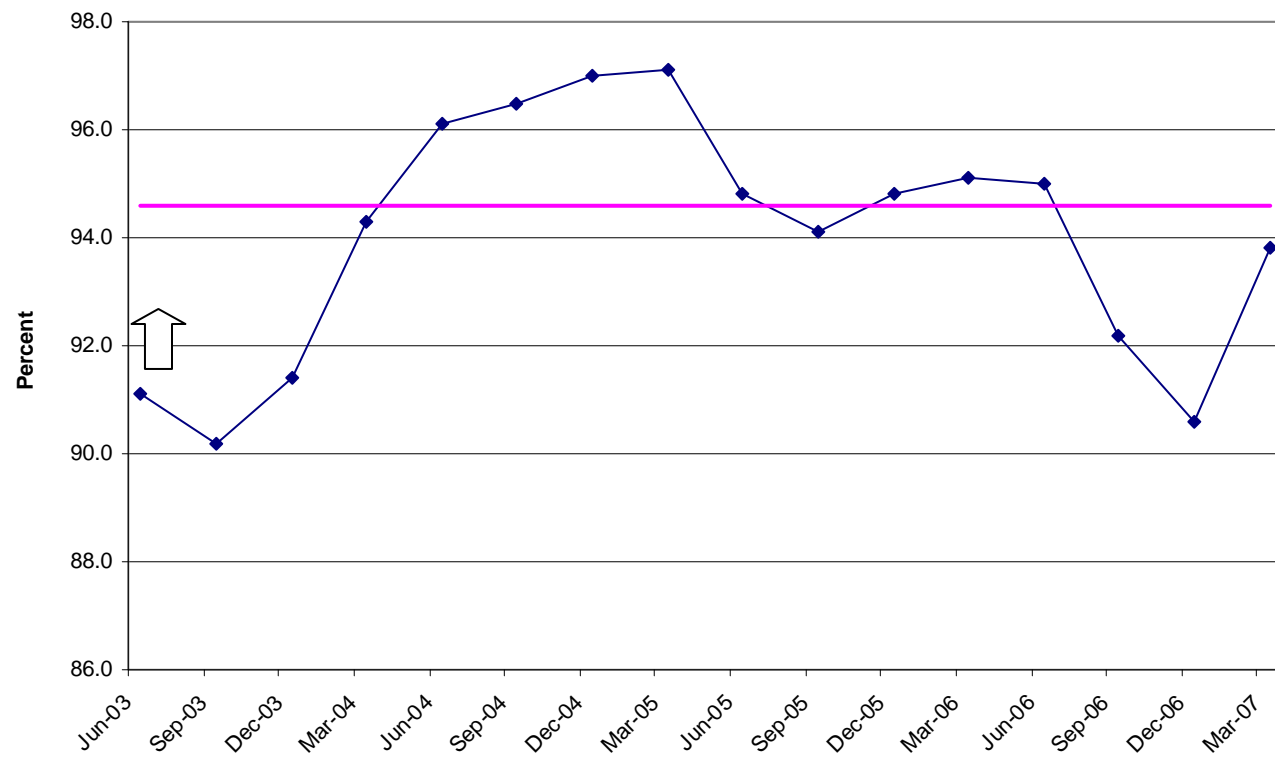
Improvement Goal 1.0 Continued adherence to 2B/2C timely response and social worker visit compliance.

Time Period 16

2B	Timely Response (Imm. Response Compliance)	01/01/07	03/31/07	135	147	**91.8**
2B	Timely Response (10-Day Response Compliance)	01/01/07	03/31/07	303	332	**91.3**
2C**	Timely Social Worker Visits with Child (Month 1)**	Jan 2007	Jan 2007	342	353	**96.9**
2C**	Timely Social Worker Visits with Child (Month 2)**	Feb 2007	Feb 2007	366	377	**97.1**
2C**	Timely Social Worker Visits with Child (Month 3)**	Mar 2007	Mar 2007	412	424	**97.2**

Strategy 1. 1 Research, evaluate and develop department policies that will lead to consistent and stable best practice.	**Strategy Rationale[1]** At the center of safety and stability is the need to ensure staff is compliant with contact requirements.		
Milestone	**1.1.1 Conduct a review of department policies and procedures as written within department program directives and make recommendations on updates and/or changes.**	**Timeframe** 2 years	**Assigned to** PAM Other branches Community
	1.1.2 Review, update and finalize department Emergency Response Manual.	1 Year	PM Analysts Supervisors
	1.1.3 Review, update and finalize department	1 Year	PM

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[1] Describe how the strategies will build on progress and improve this outcome or systemic factor

	Standby Manual.					Analysts Supervisors
Strategy 1. 2 Pathways to Safety				**Strategy Rationale** [1] Prevention and early intervention efforts developed within Child Welfare redesign will allow the development of promising practices that will allow reallocation of social worker time and ensure new levels of service for families.		
Milestone	**1.2.1 Evaluate Initial data output for impact on levels of recurrence pre and post implementation of Pathways to Safety.**	Timeframe	1 year	Assigned to		Data and Statistics Analyst
	1.2.2 Engage community to develop mechanisms for ongoing training focused on collaborative understanding of systems, abilities and service.		Ongoing			Community Assigned Department Staff
Strategy 1. 3 Evaluate and develop best practice guidelines to support case planning				**Strategy Rationale** [1] To ensure contact requirements are timely and within the family needs assessment, best practice standards must be re-evaluated.		
Milestone	**1.3.1 Convene Supervisors group to evaluate and make recommendations to improve case plan development, data entry, and consistency of practice.**	Timeframe	3 months	Assigned to		PM Supervisors
	1.3.2 Implement recommendations of the supervisor work group.		Year 2			Department Staff
	1.3.3 Increase engagement with partner branches and agencies to develop a more integrated approach to service provision.		2 years			Department Staff

Strategy 1.4 SDM			**Strategy Rationale [1]** Standard assessment remains a priority area for FCS and requires focus and review to ensure consistent application.	
Milestone	**1.4.1 Engage Supervisors in review of the use of "Overrides" for impact on best practice.**	**Timeframe** 6 -12 months	**Assigned to** PM Supervisors Staff	
	1.4.2 Evaluate the ability to increase the department's response to pre-placement preventative services as directed by SDM.	1-2 years	Director PM	
Strategy 1.5 Engage and evaluate departmental workflow and connections to ongoing quality improvement and accountability.			**Strategy Rationale [1]** The creation of effective reports and tools are essential to ensure continuous quality improvement and works to support change management.	
Milestone	**1.5.1 Survey supervisors and line staff regarding data that would enhance unit performance and practice.**	**Timeframe** 6 months	**Assigned to** Management Staff	
	1.5.2 Review and evaluate current evaluation practices in conjunction with findings from *1.5.1* and determine ability to implement changes.	12 months	Management Staff	

Describe systemic changes needed to further support the improvement goal.

Internal system discussion to identify overlaps and shared objectives between partner departments and agencies, thus ensuring effective financial maximization and cross-agency support. Inclusion of Standard assessment tools within CWS/CMS along with increased ability of use for dedicated counties.

Describe educational/training needs (including technical assistance) to achieve the improvement goals.

Continued TA for fiscal leveraging and financial maximization.

Identify roles of the other partners in achieving the improvement goals.

Community engagement is required for Differential Response to be successful and efforts to engage and market providers of prevention and early intervention is required.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

State allocation of more funding to adequately support the minimum staff required to meet all state and federal mandates for the provision of child welfare services. Continued flexibility with funding allocated to support Differential Response.

Outcome/Systemic Factor:

Federal Permanency Composite 4: Measure 1
C4.1: Placement Stability (8 Days To 12 Months In Care)
This measure computes the percentage of children with two or fewer placements in foster care for 8 days or more, but less than 12 months. Time in care is based on the latest date of removal from the home. The denominator is the total number of children who have been in care for at least 8 days but less than 12 months; the numerator is the count of these children with two or fewer placements. This measure contributes to the fourth permanency composite.

Federal Permanency Composite 4: Measure 2
C4.2: Placement Stability (12 To 24 Months In Care)
This measure computes the percentage of children with two or fewer placements in foster care for at least 12 months, but less than 24 months. Time in care is based on the latest date of removal from the home. The denominator is the total number of children who have been in care for at least 12 months and less than 24 months; the numerator is the count of these children with two or fewer placements. This measure contributes to the fourth permanency composite.

Federal Permanency Composite 4: Measure 3
C4.3: Placement Stability (At Least 24 Months In Care)
This measure computes the percentage of children with two or fewer placements who have been in foster care for 24 months or more. Time in care is based on the latest date of removal from the home. The denominator is the total number of children who have been in care for 24 months or more; the numerator is the count of these children with two or fewer placements. This measure contributes to the fourth permanency composite.

County's Current Performance:

C4.1 Placement Stability (8 Days To 12 Months In Care)
In care during the year (at least 8 days but less than 12 months): Two or fewer placement settings
Agency Type=Child Welfare
Apr 1, 2006 to Mar 31, 2007
Monterey

	Placement-Type										All
	Pre-Adopt	Kin	Foster	FFA	Court Specified	Group	Shelter	Guardian	Other	Missing	
	%	%	%	%	%	%	%	%	%	%	%
PERCENT											
Two or fewer placements	66.7	89.1	88.8	100	.	80.5	.	.	.	.	88.3
More than two placements	33.3	10.9	11.3	0	.	19.5	.	.	.	.	11.7
Total	100	100	100	100	.	100	.	.	.	.	100

C4.2 Placement Stability (12 To 24 Months In Care)
In care during the year (at least 12 months but less than 24 months): Two or fewer placement settings
Agency Type=Child Welfare
Apr 1, 2006 to Mar 31, 2007

Monterey

	Placement-Type										All
	Pre-Adopt	Kin	Foster	FFA	Court Specified	Group	Shelter	Guardian	Other	Missing	
	%	%	%	%	%	%	%	%	%	%	%
PERCENT											
Two or fewer placements	90.9	70.4	74.2	30	100	33.3	.	.	.	.	67.5
More than two placements	9.1	29.6	25.8	70	0	66.7	.	.	.	.	32.5
Total	100	100	100	100	100	100	.	.	.	.	100

C4.3 Placement Stability (At Least 24 Months In Care)
In care during the year (at least 24 months): Two or fewer placement settings
Agency Type=Child Welfare

Monterey

	Placement-Type										All
	Pre-Adopt	Kin	Foster	FFA	Court Specified	Group	Shelter	Guardian	Other	Missing	
	%	%	%	%	%	%	%	%	%	%	%
PERCENT											
Two or fewer placements	41.9	50	50	35.3	25	5.3	.	50	.	.	39.1
More than two placements	58.1	50	50	64.7	75	94.7	.	50	.	.	60.9
Total	100	100	100	100	100	100	.	100	.	.	100

Performance Over Time:

C4.1--Placement Stability (8 Days To 12 Months In Care)
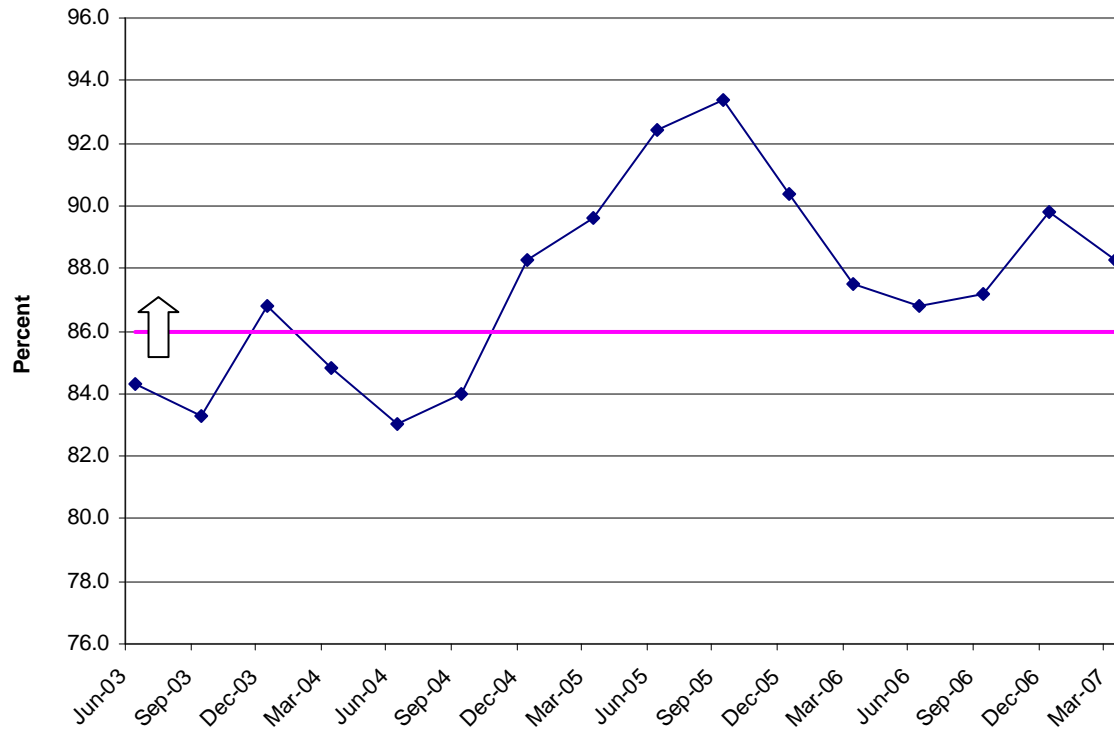
C4.2--Placement Stability (12 To 24 Months In Care)

C4.3--Placement Stability (At Least 24 Months In Care)

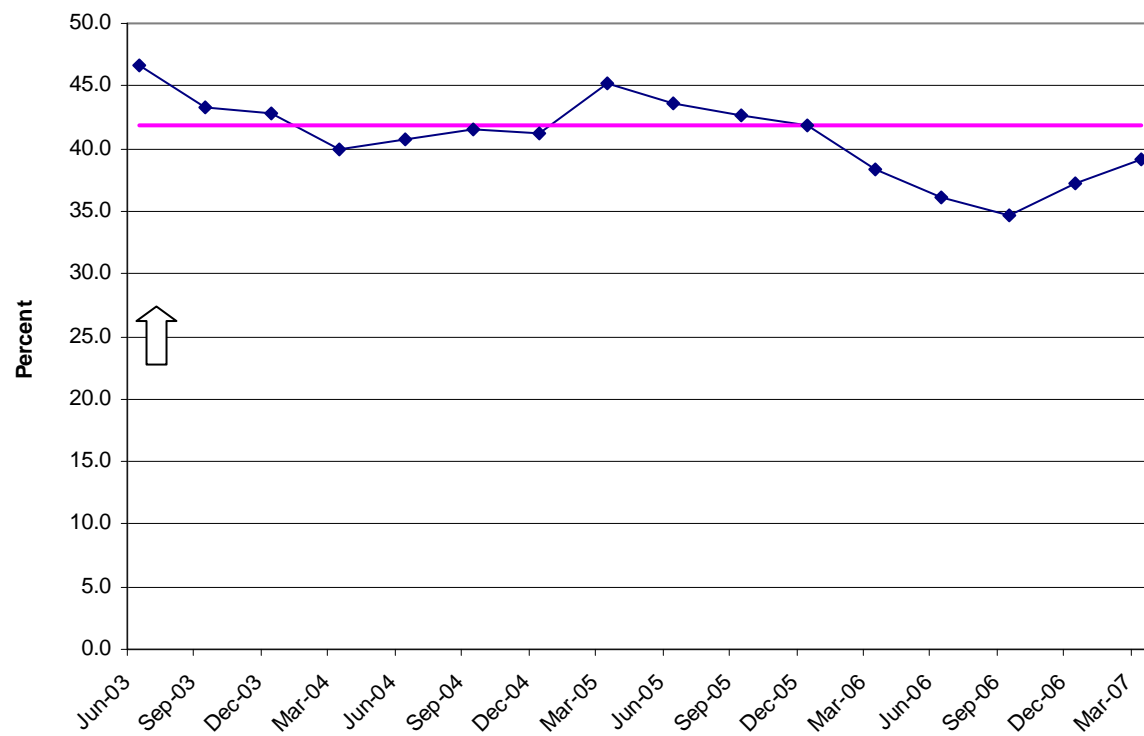| Improvement Goal 1.0 Development of a comprehensive approach to continued implementation of AB490					
Strategy 1. 1 Evaluate and determine realistic abilities to meet the intent of the legislation.			**Strategy Rationale[2]** In order to support the educational rights of foster youth and provide targeted supports for Foster Families, AB 490 (Stienberg) has been identified as an area that can influence overall stability.		
Milestone	**1.1.1 Request FYS convene a discussion on clarification of roles and responsibilities of the coordinator, 490 liaisons and administrative support.**	**Timeframe**	10 Months	**Assigned to**	PM Analyst Probation Representative
	1.1.2 Review and determine adherence to Program Directive # 06-06.		10 Months		PM Supervisors
Strategy 1. 2 Determine an approach for the Internal application of AB 490 and of existing program directive 06-06.			**Strategy Rationale [1]** With the development of new "best practice" recommendations it is necessary to ensure adequate resources are available.		
Milestone	**1.2.1. Based on review, evaluate available resources to implement changes and/or adjustments to existing policies.**	**Timeframe**	6 to 10 Months	**Assigned to**	PM Analyst Supervisors Educational workgroup
	1.2.2 Review recommendations of the Foster Youth Education Task Force for implementation.		6 to 10 Months		PAM
Strategy 1. 3 Improve communication and ensure a clear focus for the department.			**Strategy Rationale [1]** At the center of our self assessment there was an identified need to improve overall communication and increase available information.		

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[2] **Describe how the strategies will build on progress and improve this outcome or systemic factor**

Milestone		Timeframe		Assigned to	
	1.3.1 Review effectiveness of efforts at gathering educational information at TDM meetings.		Quarterly		PM Supervisors
	1.3.2 Establish SPOC for timely exchange of information with FYS and 490 Liaisons.		6 Months		Educational workgroup
	1.3.3 Disseminate information to all staff regarding changes, updates and requirements.		Quarterly		PM Supervisors
	1.3.4 Revise and update FCS mission statement to reflect FTF philosophy and values.		12 Months		PAM

Strategy 1.4 Ensure efforts are consistent through a review of all aspects that may effect ongoing training.	**Strategy Rationale [1]** In order to ensure incorporation of AB 490 into practice, it is necessary to review and evaluate different aspects of training.

Milestone		Timeframe		Assigned to	
	1.4.1 Review existing training on Data entry for CMS to ensure consistent documentation of educational information, educational surrogate and 490 liaisons.		6 Months		PM Training Supervisor
	1.4.2 Survey existing supervisors and staff for level of knowledge of educational information and determine the need for additional training/support.		10 Months		PM
	1..4.3 Evaluate the level of consistent information that is provided at TEAM and ROOTS		Bi-annual		PM Analyst Contractors

	Strategy 1.5 I Implement a process of ongoing and consistent quality improvement.			Strategy Rationale [1] Regular and consistent information is necessary to ensure the development of effective practice.	
Milestone	**1.5.1 Develop a tool for qualitative review of Educational Passport.**	**Timeframe**	6 Months	**Assigned to**	Educational workgroup
	1.5.2 Determine the ability to ad-hoc CWS/CMS for reports to track educational information.		12 Months		Data and Statistics Group

	Improvement Goal 2.0 Ensure effective recruitment, ongoing retention and stability for caregivers.				
	Strategy 2.1 Continue the infusion of Family to Family (FTF) concepts, philosophy and practice.			**Strategy Rationale [1]** At the core of our redesign efforts are the beliefs and practice centered in FTF. These beliefs are directly connected to overall stability.	
Milestone	**2.1.1 Conduct refresher training for FTF within each coalition and assess audiences overall understanding of core strategies.**	**Timeframe**	24 months	**Assigned to**	PM Training Supervisor Hartnell
	2.1.2 Within the philosophy of FTF, establish guidelines for engagement of foster families through increased in-home contact.		12 Months		Visitation workgroup
	2.1.3 Conduct training that establishes and develops linkages between FTF philosophy and core social work practice and values.		24 Months		PM Training Supervisor

Strategy 2. 2 Improve overall support for activities that impact recruitment/retention.			Strategy Rationale [1] Within FTF and at the center of change is the recruitment and support of caregivers.		
Milestone	**2.2.1 Develop a plan to implement "One Home, One School" philosophy.**	**Timeframe**	6 Months	**Assigned to**	Recruitment sub-committee
	2.2.2 Assess the department's ability to continue efforts around "Child Specific Recruitment" and implement next steps.		6-12 Months		PP Unit
	2.2.3 Within FTF philosophy, ensure contact with resource families is conducted within the guidelines established within "social worker expectations"		3 Months		PM Supervisors
Strategy 2.3 Develop and implement a QA-Satisfaction Survey with all caregivers.			Strategy Rationale [1] Ongoing qualitative review is necessary to ensure an effective change management process.		
Milestone	**2.3.1 Develop and implement an annual survey to address overall satisfaction and support.**	**Timeframe**	Yearly	**Assigned to**	RSU
	2.3.2 Establish guidelines to review and make recommendations based on information received.		12 Months		PAM RSU

Describe systemic changes needed to further support the improvement goal.

In order to ensure long lasting and supportive changes it is necessary to ensure across systems and departments realistic abilities to meet legislative and philosophical changes.

Describe educational/training needs (including technical assistance) to achieve the improvement goals.

Improved training for social workers and line supervisors will increase the effectiveness of redesign efforts, resulting in an improvement in performance in our outcome areas.

Identify roles of the other partners in achieving the improvement goals.

It is imperative that efforts are continued to bridge across service programs and departments for the maximization of funding for services and supports.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

State allocation of additional funding to adequately support the minimum staff required to meet all state and federal mandates for the provision of child welfare services. Legislation could be enacted that directs Juvenile Court activity to be congruent with best practices and research/evidence based intervention strategies, while ensuring that non-related and Relative caregivers are encompassed in changes.

Outcome/Systemic Factor:

C1.1 Of all children discharged from foster care to reunification during the year who had been in foster care for 8 days or longer, what percent were reunified in less than 12 months from the date of the latest removal from home?

C2.1 Of all children discharged from foster care to a finalized adoption during the year, what percent were discharged in less than 24 months from the date of the latest removal from home?

County's Current Performance:

C1.1 Reunification Within 12 Months (Exit Cohort)

Exits to reunification during the year: Reunified in less than 12 months

Agency Type=Child Welfare

<mark>Apr 1, 2006 to Mar 31, 2007</mark>

Selected Subset: Number of Days in Care: 8 days or more

Monterey

		Last Placement Type									All
	Pre-Adopt	Kin	Foster	FFA	Court Specified Home	Group	Shelter	Guardian	Other	Missing	All
	%	%	%	%	%	%	%	%	%	%	%
COUNT											
Reunified in less than 12 months	.	46.8	75	85.7	.	95.7	.	.	.	.	65.1
Reunified in 12 months or more	100	53.2	25	14.3	100	4.3	.	.	.	.	34.9
Total	100	100	100	100	100	100	.	.	.	.	100

C2.1 Adoption Within 24 Months (Exit Cohort)

Exits to adoption during the year: Adopted in less than 24 months

Agency Type=Child Welfare

Monterey

	Placement-Type										All
	Pre-Adopt	Kin	Foster	FFA	Court Specified	Group	Shelter	Guardian	Other	Missing	
	%	%	%	%	%	%	%	%	%	%	%
PERCENT											
Adopted within 24 months	.	26.1	55	42.9	0	.	.	.	.	.	38.5
Not adopted within 24 months	.	73.9	45	57.1	100	.	.	.	.	.	61.5
Total	.	100	100	100	100	.	.	.	.	.	100

Performance Over Time:

C1.1--Reunification Within 12 Months (Exit Cohort)
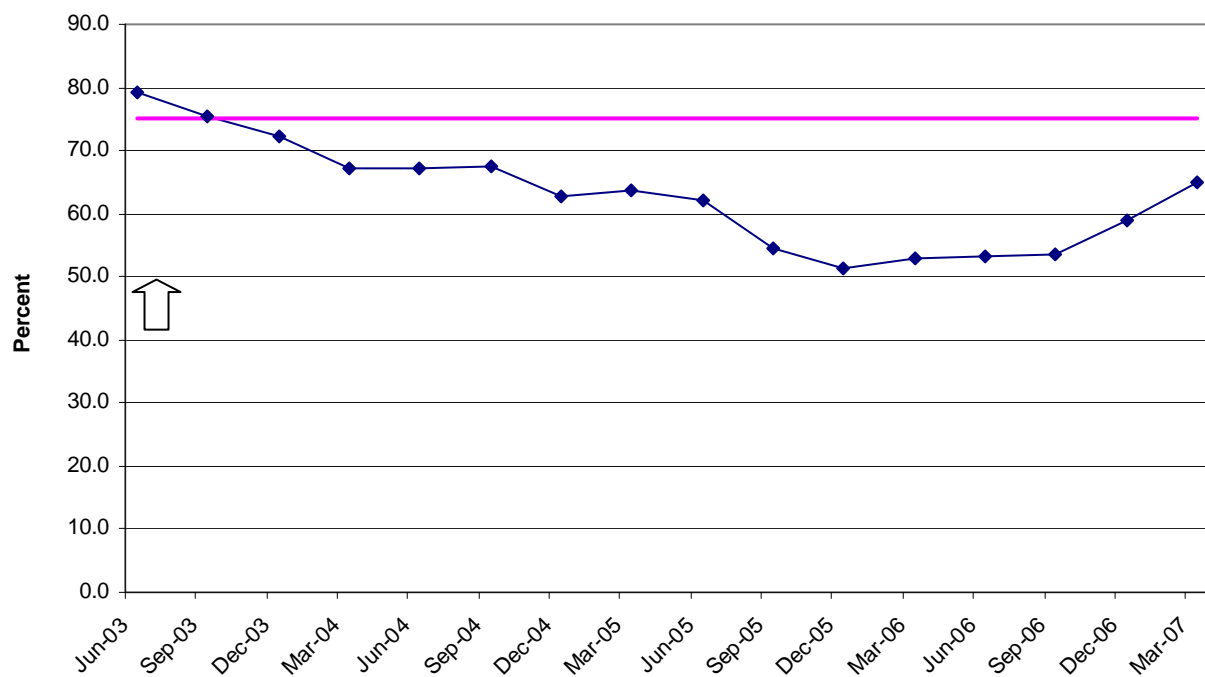
C2.1--Adoption Within 24 Months (Exit Cohort)
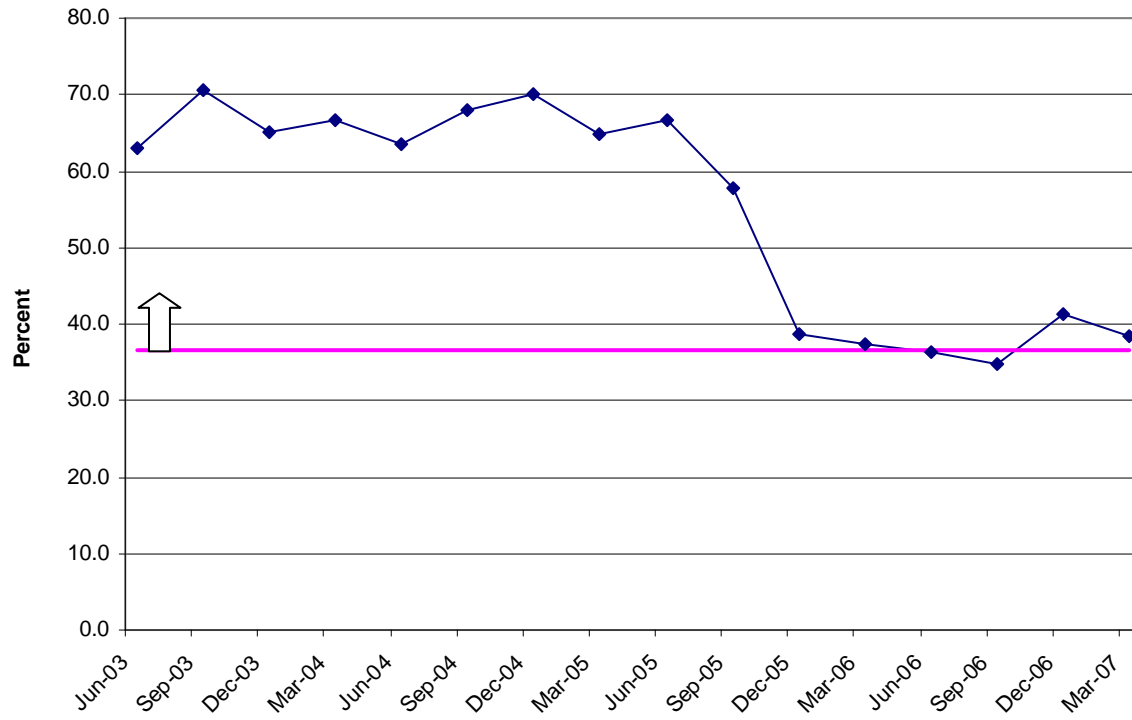
Improvement Goal 1.0 Systematic review of factors effecting timelines that impact reunification and adoption

Strategy 1. 1 Review court process and timelines	Strategy Rationale[3]
	Based on information gathered through the SA and PQCR additional discussion is necessary to re-evaluate current practice.

		Timeframe		Assigned to
Milestone	**1.1.1 Evaluate and implement improvements for case transfers between units. Including requirements, documentation, and the use of existing PD's.**		6 to 12 months	Supervisors Staff Training Supervisor
	1.1.2 Initiate discussion on potential strategies to evaluate and improve overall practices with dependency court		Start within 3 months and develop an ongoing schedule	Program Managers CC Courts Supervisors
	1.1.3 Evaluate adoption home study and appeal process to identify ways to improve timelines.		Start within 3 months and develop an ongoing schedule	Program Managers Supervisors Staff Training Supervisor

Strategy 1. 2 Evaluate practice standards within Case management (Department and unit)	**Strategy Rationale [1]** Further adherence to promising or best practice will allow for overall impact on these measures.

		Timeframe		Assigned to
Milestone	**1.2.1 Conduct a department needs assessment for the implementation of a best practice model of visitation.**		12 Months Starting Jan 08	Program Managers Visitation Sub Group
	1.2.2 Develop a process to evaluate all children involved with FR for participation in Wrap		12 Months Starting Jan 08	Program Managers Supervisors
	1.2.3 Evaluate exiting practice and use of TDM as It relates to permanency and stability		Ongoing	TDM Sub Group

Strategy 1. 3 Improve understanding and level of knowledge regarding permanence, concurrent homes, and accountability.	**Strategy Rationale [1]** Information gathered through the review of PQCR findings and qualitative information indicated a need for increased information and resources regarding permanence.

Milestone		Timeframe		Assigned to	
	1.3.1 Evaluate unified home study and develop a strategic approach to cross department communication on available concurrent homes		12 Months		Program Managers Supervisors
	1.3.2 Review and train new staff on existing resources, policies and practice on permanency.		6 to 18 Months		Program Managers Supervisors Staff Trainers

Strategy 1.4 Increased monitoring and compliance.	**Strategy Rationale [1]** Staff involvement is necessary to sustain an environment of change management that ensures best practice.

Milestone		Timeframe		Assigned to	
	1.4.1 Develop a staff level approach for the evaluation of past practice and future direction for case management tools aimed at timeline improvement and promotion of personal accountability within required regulations.		2 year		Supervisors Staff Analysts

Strategy 1.5 Continued development of "Family Reunification Partnership" program(FRP)	**Strategy Rationale [1]** New and promising practices allow for the exploration of practice to ensure increased supports that improve outcomes.

Milestone		Timeframe		Assigned to	
	1.5.1 Evaluate case level information and develop measures for outcomes.		12 month		Program Managers Analysts Supervisor BH
	1.5.2 Expand FRP model for case planning to all FR cases		2 year		Program Managers Analysts Supervisors BH Supervisors

	1.5.3 Expand FRP as resources become available.		2 year		Program Managers Analysts BH

Describe systemic changes needed to further support the improvement goal.

Consistent practice within Dependency Court with ongoing dialogue focused on system improvement.

Describe educational/training needs (including technical assistance) to achieve the improvement goals.

Ongoing evaluation on a macro level to ensure statewide best practices across disciplines.

Identify roles of the other partners in achieving the improvement goals.

Continued development of inter-agency communication for services to shared populations.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

None-noted.

Outcome/Systemic Factor:
Work Force Development

County's Current Performance: At this current time Family and Children's Services has identified, through interviews, surveys and assessments a series of target areas that will impact our overall performance and best practice. Current Staffing levels are as follows:

PROGRAM	LINE STAFF POSITIONS	SUPERVISORS
Emergency Response/Intake/Screening	23	4
Family Maintenance/VFM	4	0
Family Reunification/FM	14	2
Permanency Planning	7	1
Placement Support	7	1
Adoptions	11	1
Court Unit	7	1
Social Service Aides	9	1
Social Work Supervisor Trainer		2
Office Support/Clerical	17	1
DV/CalWORKs Social Workers	2	
Child Advocacy Center (Forensic Interviewer)	1	
Managers	10	
TOTAL	**112**	**14**

**There are currently 5 vacancies.

Improvement Goal 1.0 Development of a workforce that is able and willing to support best and promising practices.					
Strategy 1. 1 Improved communication.			Strategy Rationale[4] In order to improve the ability to support continued change focus on communication, training and support structures need to be consistent and sustained.		
Milestone	**1.1.1 Review, evaluate and make recommendations regarding existing communication surveys with a focus on how to improve Internal communication.**	**Timeframe**	3 to 6 Months	**Assigned to**	Management Supervisors and Line Staff
	1.1.2 Initiate discussions to improve communication with partners and service providers (Community and Agency).		3 to 6 Months		Management Partners Providers
Strategy 1. 2 Increased training aimed at developing improved relationships and program understanding.			Strategy Rationale [1] Improved training regiments may develop an increased ability to support sustainable change aimed at improved federal outcomes.		
Milestone	**1.2.1. Develop an Inter-agency training curriculum**	**Timeframe**	12 to 18 Months	**Assigned to**	Management Training Staff Partners
	1.2.2 Increase CWS/CMS training to ensure consistent and regular use by staff and explore the ability to deliver training online.		12 Months		Management Training Staff
	1.2.3 Evaluate existing training curriculum to ensure elements are present to reduce identified silos within existing units.		6 to 24 Months		Management Training Staff

			Strategy Rationale [1]
Strategy 1. 3 Development of Supervisor Supports			Increased supports will allow for consistency and increased understanding across unit supervisors.

			Timeframe		Assigned to	
Milestone	**1.3.1 Review and adjust the outline and documentation for ongoing supervisors meetings to meet department expectation on position development.**		3 to 6 Months			Program Managers
	1.3.2 Develop and implement tool for supervisor skill tracking including understanding of cross unit tools and/or policies. (i.e.: SDM, FRP, P2S)		3 to 9 Months			Program Managers
	1.3.3 Develop and train a series of Training for Trainers aimed at supervisor development and staff transfer of learning.		9 to 24 Months			Program Managers Training Supervisor

			Strategy Rationale [1]
Strategy 1.4 Development of Staff Support			Increased supports will allow for consistency and increased understanding across units.

			Timeframe		Assigned to	
Milestone	**1.4.1 Review and adjust the use of employee training plans**		3 to 6 Months			Program Managers Training Supervisor
	1.4.2 Develop and implement tools for tracking knowledge requirements by job title		3 to 18 Months			Program Managers
	1.4.3 Ensure all active Electronic Program Directives are posted for staff.		3 to 18 Months			Management Support Staff

			Strategy Rationale [1]
Strategy 1.5 Improved Quality Assurance/Management			Increased tracking and evaluation will allow for consistency and increased understanding across all units

Milestone		Timeframe		Assigned to	
	1.5.1 Develop and refine a process of strength based accountability and quality assurance/improvement.		12 to 24 Months		Management
	1.5.2 Develop policies on the use, dissemination and tracking of information derived from QA.		12 to 24 Months		Management
	1.5.3 Increase understanding and use of Data.		12 to 24 Months		Management All Staff

Describe systemic changes needed to further support the improvement goal.

Ongoing and consistent discussions aimed at maximization of supports for common populations.

Describe educational/training needs (including technical assistance) to achieve the improvement goals.

Statewide support for new and promising practices to establish cross agency training.

Identify roles of the other partners in achieving the improvement goals.

Increased funding to support a more comprehensive and supportive training curriculum.
Increased flexibility for use of available funding streams.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

Non-noted.

Outcome/Systemic Factor: (PROBATION)
Family Well Being: Engaging Family Relationships and Community Connections

Based on the January 2007 PQCR outcomes, internal evaluations, and a redirection of the philosophy of family engagement, a new methodology of expanded engagement will be the department's focus. Family engagement which includes, but are not limited to, safety, permanency, and child and family has proven to have better outcomes for the stability of the minor and his/her respective family.

County's Current Performance:
In FY 07/08, as reported on the Probation Foster Care Placement Monthly Caseload Statistical Report, the county's average for probation minors in out-of-home care is 36.6. Historically, the department's data collection methods have varied and continue to struggle to align more efficient methods of capturing information with their limited technical capabilities. A paradigm shift has emerged from research models to expand the documentation and clarity of services provided to the minor while escalating the depth of services to the minor's respective family. The foster parent, near-kin, and adoption processes are emerging in Probation as we recognize the need to continue our search for permanent family resources for our children. This shift impacts the current case plan documentation process and quality assurance issues related to the Federal Title IV-E guidelines.

Improvement Goal 1.0
To explore and identify practices and/or policies that supports the engagement of the minor and his/her family to improve the timeliness of reunification and permanency in a </= 12 month period.

Strategy 1. 1 **Identify any regulatory or statutory changes in the family narrative of the Pre-Permanency, Permanency and Post-Permanency court documents.**	**Strategy Rationale[5]** In relation to a January 2007 Administrative Office of the Courts recommendations stating that detailed, factual information must be included that identify expanded narratives on each parent, and possible non-custodial parents, relatives, non-relative resources.

Milestone	**1.1.1** **Identify regulatory or statutory changes or recommendations to the Pre-Permanency, Permanency, and Post-Permanency court documents.**	**Timeframe**	2 months - 2/2008	**Assigned to**	Probation Services Manager
	1.1.2 **Evaluate the revisions necessary to any document templates and establish standard practice guidelines. Train staff on revisions.**		6 months - 6/2008		Management Analyst Training Manager

	1.1.3 **Establish a system to monitor the respective court documents, assign review duties, and create a monthly measurement tool.**	9-months - 9/2008		Management Analyst

Strategy 1. 2	Strategy Rationale [1]
Plan, design and coordinate internal and external training including, but not limited to, collaborative agencies, to develop and expand probation officers in family engagement.	By reason of recommendations established from the Peer Quality Case Review, January 2007, work and efforts to engage families including meeting with them monthly and diligently document.

Milestone		Timeframe		Assigned to
	1.2.1. **Explore and identify three areas of skill training needed to expand family engagement.**	2 months – 2/2008		Training Manager
	1.2.2 **Coordinate and schedule training.**	6 months – 6/2008 – on-going		Training Manager
	1.2.3 **Establish a system to monitor the effectiveness of the training with a randomly selected group of Probation Officer's.**	6 months – 6/2008		Management Analyst

Strategy 1. 3	Strategy Rationale [1]
To explore and identify best practices in case plan documentation.	Based from management meetings, input and buy-in from the department's staff carries the voice of case plan user friendliness, gaining efficiencies, and streamlining processes to remove redundancy.

Milestone		Timeframe		Assigned to
	1.3.1 **Research the current capabilities and practice of the Assessments.com Monterey Case Plan and 2 other case plan formats that are in compliance with Division 31 Regulations.**	4 months – 4/2008		Management Analyst

		Timeframe		Assigned to
	1.3.2 **Present findings and come to agreement on the case plan template. Identify any revisions necessary and follow-through with changes.**	6 months – 6/ 2008		Management Analyst Probation Services Managers
	1.3.3 **Coordinate and schedule training. Continue to use internal quality assurance tool to measure effectiveness of training.**	9 months – 7/2008 - ongoing		Training Manager - Training Management Analyst - QA

Strategy 1. 4 **To explore and evaluate a pilot program that focuses on parent and child relationships that could be facilitated by Deputy Probation Officer's or other non-sworn Probation staff at the department's site.**	**Strategy Rationale** [1] Based on positive training outcomes, explore and evaluate other programs offered by Salinas Adult School.

Milestone		**Timeframe**	**Assigned to**
	1.4.1 **Research and identify program/ class that focuses on strengthening parent and child relationships. Identify potential trainers.**	3 months – 3/ 2008	Management Analyst
	1.4.2 **Coordinate and schedule training using internal or external resources.**	4 months – 4/2008	Training Manager
	1.4.3 **Establish five outcome measurements for participants. Measure pilot participants outcomes levels at 1 month, 3 month and 6 month stages.**	12/ 2008, 3/ 2009, and 6/ 2009	Management Analyst

Describe systemic changes needed to further support the improvement goal. Explore internal opportunities of additional support staff for clerical functionalities and wraparound case loads.

Describe educational/training needs (including technical assistance) to achieve the improvement goals.
Explore internal capabilities of internal Trainer development. Explore and examine case management systems that integrate Adult, Juvenile and Juvenile Hall data and records.
Identify roles of the other partners in achieving the improvement goals.
Collaborative training between county departments, programs, and service providers.
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.
Without access to CWS/CMS, the challenge for efficiencies increases due to the lack of awareness of historical histories of minor children and the programs and services provided. Lack of an internal, statewide Probation infra-structure that identifies standard processes where applicable. Lack of a statewide Probation case management system that was integrated with CWS/CMS.

[1] **Describe how the strategies will build on progress and improve this outcome or systemic factor**

Monterey County Children's Council Membership

Manuel Real, Chair
Chief Probation Officer
Monterey County Probation Department

Dr. Nancy Kotowski, Vice Chair
Superintendent of Schools
Monterey County Office of Education
(Anne Wheelis, Alternate)

Mary Adams
President and CEO
United Way of Monterey County
(Katy Castagna, Alternate)

Jayanti Addleman
County Librarian
Monterey County Free Libraries
(Ruth Paget, Alternate)

Valerie Barnes, M.D.
Director of Pediatrics NMC
(David Maradei, Alternate)

Dee Baker
Superintendent
Washington Union School District

Wayne Clark, Ph.D.
Director
Monterey County Behavioral Health

James Egar
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Monterey County Public Defender Office
(Catherine Brennan, Alternate)

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District Attorney
Monterey County District Attorney's Office
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Len Foster
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Ronald E. Graddy
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Chief, Child and Youth Services
Presidio of Monterey
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Office of Sheriff
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(Jeff Bryant, Alternate)

Charles McKee
County Counsel
(Annette Cutino, Alternate)

James Nakashima
Executive Director
Housing Authority of Monterey County
(Mary Jo Zenk, Alternate)

John Pinio
Director
Monterey County Parks Department
(Stella Sandoval, Alternate)

Carolyn Post
Superintendent
North Monterey County Unified School District

Judge Jonathan Price
Juvenile Court

Elliott Robinson
Director
Department of Social and Employment Services

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